BEST AVAILABLE COPY

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

		IMS AS	FILED -	SMALL ENTITY		OTHER THAN					
			(C	olumn 1)		(Column 2)			OR	SMALL	
FOR			NUMBER FILED		NUMBER I	NUMBER EXTRA		FEE		RATE	FEE
BASIC FEE						A Paris Con		345.00	OR		690.00
TOTAL CLAIMS			20	minus 2	20= *	2	X\$ 9=	·	OR	X\$18=	36
IND	EPENDENT CL	AIMS	1/2	minus	3 = /		X39=		OR	X78=	78
MULTIPLE DEPENDENT CLAIM PRESENT									OR	+260=	
* If	the difference	ımn 1 is	less than ze	TOTAL		ÖR	TOTAL	804			
CLAIMS AS AMENDED - PART II										OTHER	THAN
			umn 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REM AF	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	<u> </u>		Minus	***	<u> </u> =	X39=		OR	X78=	
	HHS1 PHESE	NIAIIC	ON OF MI	JLIIPLE DEF	PENDENT CLAIM		+130=		OR	+260=	
							TOTAL		OR	TOTAL ADDIT. FEE	
		(Col	umn 1)		(Column 2)	(Column 3)	ADDIT. FE	- I	I		
_		CL	AIMS		HIGHEST		l	ADDI-			ADDI-
AMENDMENT B		Al	IAINING FTER NDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*		Minus	***	= -	X39=		OR	X78=	
H	FIRST PRESE	+130=		OR	+260=						
									OR	TOTAL	
1.							ADDIT. FE	<b>:</b>	Jort	ADDIT. FEE	
<u> </u>	hard a second		umn 1) .AIMS	E CONTRACT	(Column 2) HIGHEST	(Column 3)	]				
AMENDMENT C		REM A	MAINING FTER NDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*		Minus	***	=	X39=	<u> </u>	OR	X78=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	255	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										+260=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/64/450

## Total Fee Calculation

		romire	e Calculatio	32		
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	Sart.			S = . ಕ್ರೀಟರ್ಗ್ಗ	Lg Estiry	
Buic Filing Fee	201/101			<u></u>		690
Total Claims > 20	203/103	29	- 2 x	<del></del>		36
ادر تصنی کا العظم ال	- 202/102	<u> </u>	x <u>/</u> x			78
Mult Dep Claim Present	<u> </u>					
Sumbuge	200/100	•				130
English Translation	179			_		
TOTAL FEE CALCUL	<u>ATTON</u>					<u>734</u>
Fees due upon filing (	Ba applicacion.				• .	
Total Filing Fees Due	= \$	· · · · · · · · · · · · · · · · · · ·	934			
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BALANCE DUE	= <b>s</b>	9.	34			
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Office of Laivial Patent	Examplian			•	_	

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